U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number Filing Date PATENT APPLICATION FEE DETERMINATION RECORD 10/554.638 10/27/2005 To be Mailed Substitute for Form PTO-875 APPLICATION AS FILED - PART I OTHER THAN SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) OR FEE (\$) FOR NUMBER FILED NUMBER EXTRA RATE (\$) FEE (\$) RATE (\$) ■ BASIC FEE N/A N/A N/A N/A SEARCH FEE N/A N/A N/A N/A (37 CFR 1.16(k) **EXAMINATION FEE** N/A N/A N/A N/A (37 CFR 1.16(o), (p), or (q) TOTAL CLAIMS minus 20 = X \$ OR X \$ (37 CFR 1.16(i)) INDEPENDENT CLAIMS = = minus 3 = X \$ X \$ If the specification and drawings exceed 100 sheets of paper, the application size fee due ☐ APPLICATION SIZE FEE is \$250 (\$125 for small entity) for each (37 CFR 1.16(s)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j)) * If the difference in column 1 is less than zero, enter "0" in column 2. **TOTAL TOTAL** APPLICATION AS AMENDED - PART II OTHER THAN SMALL ENTITY OR SMALL ENTITY (Column 1) (Column 2) (Column 3) CLAIMS HIGHES1 REMAINING PRESENT ADDITIONAL ADDITIONAL **NUMBER** 06/16/2009 RATE (\$) RATE (\$) **AFTFR PREVIOUSLY FXTRA** FFF (\$) FFF (\$) AMENDMENT **AMENDMENT** PAID FOR Total (37 CFR * 28 Minus ** 37 = 0 OR X \$52= 0 X \$ Independent (37 CFR 1.16(h)) = 00 * 4 Minus ***4 X \$ = OR X \$220= Application Size Fee (37 CFR 1.16(s)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) TOTAL TOTAL ADD'L OR ADD'L 0 FEE **FEE** (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING PRESENT ADDITIONAL ADDITIONAL NUMBER RATE (\$) RATE (\$) PREVIOUSLY FEE (\$) **AFTER EXTRA** FEE (\$) <u>AMENDMENT</u> PAID FOR **AMENDMENT** Total (37 CFR 1.16(i)) Minus = X \$ OR X \$ Independent Minus *** OR X \$ = X \$ Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) OR TOTAL TOTAL ADD'L OR ADD'L * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. Legal Instrument Examiner: ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

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